WAUKESHA SPRINGS HEALTH & REHABILITATION

1810 KENSINGTON DRIVE

WAUKESHA 53188 Phone: (262) 548-1400 Ownership: Non-Profit Corporation
Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: Skilled
Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF? No
Number of Beds Set Up and Staffed (12/31/03): 195 Title 18 (Medicare) Certified? Yes
Total Licensed Bed Capacity (12/31/03): 195 Title 19 (Medicaid) Certified? Yes
Number of Residents on 12/31/03: 158 Average Daily Census: 155

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents	(12/31/03)	Length of Stay (12/31/03)	용
Home Health Care Supp. Home Care-Personal Care	No No	   Primary Diagnosis 	% 		ફ ફ		20.9
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0		7.6	More Than 4 Years	19.0
Day Services Respite Care	No No	Mental Illness (Org./Psy)   Mental Illness (Other)	25.9 4.4		7.6 39.2	•	72.8
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	39.9	*********	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	5.1	95 & Over	5.7	Full-Time Equivalent	
Congregate Meals	No	Cancer	2.5	1		Nursing Staff per 100 Resi	dents
Home Delivered Meals	No	Fractures	13.3		100.0	(12/31/03)	
Other Meals	No	Cardiovascular	12.7	65 & Over	92.4		
Transportation	No	Cerebrovascular	10.1			RNs	8.5
Referral Service	No	Diabetes	8.2	Gender	용	LPNs	3.4
Other Services	Yes	Respiratory	7.0			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	10.8	Male	26.6	Aides, & Orderlies	31.6
Mentally Ill	No			Female	73.4		
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		
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## Method of Reimbursement

		Medicare			Medicaid Mitle 19			Other			Private Pay	:		amily Care			Managed Care	l 		
Level of Care	No.	90	Per Diem (\$)	No.	90	Per Diem (\$)	No.	્રે જ	Per Diem (\$)	No.	90	Per Diem (\$)	No.	્રે જ	Per Diem (\$)	No.	olo	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	25	100.0	315	101	93.5	124	0	0.0	0	24	100.0	190	0	0.0	0	1	100.0	190	151	95.6
Intermediate				6	5.6	103	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	6	3.8
Limited Care				1	0.9	90	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.6
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	25	100.0		108	100.0		0	0.0		24	100.0		0	0.0		1	100.0		158	100.0

Admissions, Discharges, and Deaths During Reporting Period	Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03											
beachs builing Reporting Terrod					% Needing		Total					
Percent Admissions from:	į	Activities of	96	As	sistance of	% Totally	Number of					
Private Home/No Home Health	0.8	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents					
Private Home/With Home Health	0.8	Bathing	0.0		92.4	7.6	158					
Other Nursing Homes	4.6	Dressing	0.6		89.9	9.5	158					
Acute Care Hospitals	88.5	Transferring	24.7		66.5	8.9	158					
Psych. HospMR/DD Facilities	0.0	Toilet Use	13.9		74.7	11.4	158					
Rehabilitation Hospitals	0.0	Eating	60.1		34.8	5.1	158					
Other Locations	5.3	*****	******	*****	*****	******	*****					
otal Number of Admissions	131	Continence		용	Special Treatmen	ts	9					
ercent Discharges To:	1	Indwelling Or Extern	nal Catheter	9.5	Receiving Resp	iratory Care	15.8					
Private Home/No Home Health	21.3	Occ/Freq. Incontiner	nt of Bladder	63.9	Receiving Trac	heostomy Care	0.0					
Private Home/With Home Health	10.7	Occ/Freq. Incontine	nt of Bowel	39.9	Receiving Suct	ioning	1.9					
Other Nursing Homes	7.3				Receiving Osto	my Care	4.4					
Acute Care Hospitals	9.3	Mobility			Receiving Tube	Feeding	1.9					
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	3.2	Receiving Mech	anically Altered Diets	28.5					
Rehabilitation Hospitals	0.0											
Other Locations	5.3	Skin Care			Other Resident C	haracteristics						
Deaths	46.0	With Pressure Sores		7.0	Have Advance D	irectives	93.0					
otal Number of Discharges	į	With Rashes		4.4	Medications							
(Including Deaths)	150				Receiving Psyc	hoactive Drugs	68.4					

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This	Ownership: Nonprofit		100	Size: -199	Ski	ensure:	Al	
	Facility %	Peer %	Group Ratio	Peer %	Group Ratio	Peer %	Group Ratio	Faci.	lities Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	76.3	87.9	0.87	87.0	0.88	86.6	0.88	87.4	0.87
Current Residents from In-County	95.6	87.5	1.09	86.4	1.11	84.5	1.13	76.7	1.25
Admissions from In-County, Still Residing	52.7	22.9	2.30	18.9	2.79	20.3	2.60	19.6	2.68
Admissions/Average Daily Census	84.5	144.5	0.58	166.7	0.51	157.3	0.54	141.3	0.60
Discharges/Average Daily Census	96.8	147.5	0.66	170.6	0.57	159.9	0.61	142.5	0.68
Discharges To Private Residence/Average Daily Census	31.0	49.7	0.62	69.1	0.45	60.3	0.51	61.6	0.50
Residents Receiving Skilled Care	95.6	93.9	1.02	94.6	1.01	93.5	1.02	88.1	1.08
Residents Aged 65 and Older	92.4	97.1	0.95	91.3	1.01	90.8	1.02	87.8	1.05
Title 19 (Medicaid) Funded Residents	68.4	50.3	1.36	58.7	1.16	58.2	1.17	65.9	1.04
Private Pay Funded Residents	15.2	34.6	0.44	22.4	0.68	23.4	0.65	21.0	0.72
Developmentally Disabled Residents	0.0	0.6	0.00	1.0	0.00	0.8	0.00	6.5	0.00
Mentally Ill Residents	30.4	35.5	0.86	34.3	0.89	33.5	0.91	33.6	0.90
General Medical Service Residents	10.8	23.0	0.47	21.0	0.51	21.4	0.50	20.6	0.52
Impaired ADL (Mean)	44.4	51.9	0.86	53.1	0.84	51.8	0.86	49.4	0.90
Psychological Problems	68.4	62.2	1.10	60.0	1.14	60.6	1.13	57.4	1.19
Nursing Care Required (Mean)	8.0	7.2	1.11	7.2	1.11	7.3	1.10	7.3	1.09